

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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OMB	APPR	OVAL '	,	
OMB Num		323		ì
Expires: Estimated	April	30.2	800	
Estimated	averag	e burd	en	
hours per r	espon	se	.16.00)
SEC	USE O	NLY		

DATE RECEIVED

Name of Offering (Check if this is an amendment and name has changed, and indicate change.)	
Issuance of LLC Units and Promissory Note	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULC	DE DIE TOTAL DE LA CONTRACTION DEL CONTRACTION DE LA CONTRACTION D
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	1 (8 8) (8 8) (8 8) (8 8) (8) (8) (8) (8) (8)
1. Enter the information requested about the issuer	07087817
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Milagro Holdings, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code) Telep	hone Number (Including Area Code)
1401 McKinney, Suite 925, Houston, Texas 77010 713-307	7-7000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telep (if different from Executive Offices)	phone Number (Including Area Code)
Brief Description of Business	
Oil and gas exploration and development	
Type of Business Organization	PHUCESSED
corporation [limited partnership, already formed [other (please spec	cify):
business trust limited partnership, to be formed	X IAN 0.7 2008
Month Year Actual or Estimated Date of Incorporation or Organization: 10 0 7 Actual Estimated	7
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State.	⟨ \ \ THOMSOŅ
CN for Canada; FN for other foreign jurisdiction)	\ \\ \FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer, Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: General and/or Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Cavnar, Robert L. Business or Residence Address (Number and Street, City, State, Zip Code) 1401 McKinney, Suite 925, Houston, Texas 77010 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Piacenti, Richard W. . . Business or Residence Address (Number and Street, City, State, Zip Code) 1401 McKinney, Suite 925, Houston, Texas 77010 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☑ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Eells, Jack Business or Residence Address (Number and Street, City, State, Zip Code) 1401 McKinney, Suite 925, Houston, Texas 77010 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or **Managing Partner** Full Name (Last name first, if individual) Ginns, Jonathan Business or Residence Address (Number and Street, City, State, Zip Code) 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Bawa, Mo Business or Residence Address (Number and Street, City, State, Zip Code) 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036 Beneficial Owner Executive Officer Check Box(es) that Apply: Promoter ' Director General and/or Managing Partner Full Name (Last name first, if individual) Murray, Tim Business or Residence Address (Number and Street, City, State, Zip Code) 1301 McKinney, Suite 3105, Houston, Texas 77010 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Cohn, Adam Business or Residence Address (Number and Street, City, State, Zip Code) 1250 Fourth Street, Santa Monica, California 90401

A: BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Director Check Box(es) that Apply: Executive Officer General and/or Beneficial Owner Managing Partner Full Name (Last name first, if individual) ACON Milagro Investors, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Acon-Bastion Partners II, LP Business or Residence Address (Number and Street, City, State, Zip Code) 1133 Connecticut Avenue, NW, Suite 700, Washington, DC 20036 Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Milagro Investors, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 135 East 57th Street, 7th Floor, New York, New York 10022 Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) West Coast Milagro Partners, LLC Business or Residence Address (Number and Street, City, State, Zip Code) 1250 Fourth Street, Santa Monica, California 90401 General and/or Check Box(es) that Apply: Executive Officer Director Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

			4		.	NFORMAT	ION ABOU	I OFFERI	NG				
l.	Has the	issuer sole	d, or does t	he issuer i	niend in se	ll to non-a	ccredited i	nvestors in	this offer	inu?		Yes	No ⊠
••	1105 (110	133401 301	u, o, oots (Appendix				-	***************	L	€
2.	What is	What is the minimum investment that will be accepted from any individual?							s_10,	00.00			
												Yes	No
3.			permit join										×
4.	commis If a pers or states	sion or sim on to be lis , list the na		ration for : sociated pe proker or d	solicitation rson or age caler. If me	of purchase ent of a broker ore than five	ers in conne ter or deale c (5) person	ection with r registered as to be list	sales of see 3 with the S ed are asso	curities in t EC and/or			
	l Name (I IS Securi		first, if ind	ividua!)						·		_	
			Address (N	lumber and	d Street, C	ity, State, 2	ip Code)						
			v York, Ne										
Nar	ne of Ass	ociated Br	roker or De	aler								_	
Stat	tes in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
.,			s" or check						*******************************		•••••	□ AI	States
	AL IL NT RI	AK) IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO (LA) NM (UT)	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (I	ast name	first, if ind	ividual)			·····						
Bus	iness or	Residence	Address ()	Number an	d Street, C	ity, State, 2	Zip Code)					_	=
Nan	ne of Ass	ociated Br	oker or De	aler									
Stat	es in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers			····			
	(Check	'All States	" or check	individual	States)		**************	••••••				□ Al	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full	Name (L	ast name	first, if indi	ividual)									
Bus	iness 'ar	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)				•		
Nan	ne of Ass	ociated Br	oker or Dea	aler			•				- ,, , , ,-,- ,	_,	······································
Stat	es in Whi	ch Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers		•••				
	(Check '	All States	" or check	individual	States)	•••••	*******************	,.,,,	*****************	••••••••	***************************************	☐ All	States
	AL IL MT	AK IN NE SC	ΛΖ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	125,000,000.00	\$_125,000,000.00
	Equity	283,940,000.00	\$ 283,940,000.00
	Common Preferred		<u> </u>
	Convertible Securities (including warrants)	s	\$
	Partnership Interests	s	\$
	Other (Specify)		
	Total	408,940,000.00	\$_408,940,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	12	\$ 408,940,000.00
	Non-accredited Investors	· · · · · · · · · · · · · · · · · · ·	\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4. if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		s
	Rule 504		\$
	Total		\$ 0.00
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs		s
	Legal Fees		s 1,400,000.00
	Accounting Fees		\$
	Engineering Fees		5 90,000.00
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Administrative	_	\$ 700,000.00
	Total	بت	2,190,000.00

	C'OFFERINGIPRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS 🛶	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$406,750,000.00
5.	Indicate below the amount of the adjusted gross preeach of the purposes shown. If the amount for ar check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Pari	ny purpose is not known, furnish an estimate and if the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			. 🗆 \$
	Purchase of real estate			
	Purchase, rental or leasing and installation of mad and equipment		¬\$	s
	Construction or leasing of plant buildings and fac	cilities[_ s	. Ds
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another	¬\$	 5 406,750,000.00
	Repayment of indebtedness			_
	Working capital			
	Other (specify):			. DS
			s	
	Column Totals			==
	Total Payments Listed (column totals added)			06,750,000.00
		D. FEDERAL SIGNATURE		
sigi	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Commis	sion, upon writte	ale 505, the following on request of its staff,
Issu	er (Print or Type)	Signature	Date	
Mi	agro Holdings, LLC	Kichdw Pacut	12-21	-07
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
₹ict	nard W. Piacenti	Executive Vice President, Chief Financial Office	er and Chief Op	perating Officer

- ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

學製	E STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No Z	

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Milagro Holdings, LLC	Signature Kichol w Pracuit	12-21-07
Name (Print or Type)	Title (Print or Type)	
Richard W. Piacenti	Executive Vice President, Chief Financial C	Officer and Chief Operating Officer

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

體影響				ĀĪ	PENDIX					
1	Intend to non-a investor:	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ									<u> </u>	
AR										
CA		X	LLC Units; \$283,940,000	1	\$40,000,000.00					
со								[
ст		X	LLC Units; \$283,940,000	1	\$12,200,000.00					
DE										
DC		×	LLC Units; \$283,940,000	1	\$85,000,000.00			, ,,,		
FL									<u></u>	
GA									Γ	
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MN		.,								
MS										

APPENDIX ... 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price to non-accredited Type of investor and explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part C-Item 1) (Part E-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Investors Yes No Amount Amount MO MT NE NV NH NJ NMLLC Units; \$283,940,000 NY \$125,000,000.00 NC ND ОН OK OR PA RI SC SD TNLLC Units; \$283,940,000 Note; \$125,000,000 TX \$147,700,000.00 UT VT٧A WA wv WI

1	to non-a	d to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				lification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY									
PR									

EN